Docket No: 99/103

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below.

| I believe I am inventor (if plural name invention entitled IMPI x is attached hereto. | es are listed below ROVED PLASTIC |) of the subject r | natter which is | s claimed an | d for which a | n original, first and jo a patent is sought on | |
|---|--|--|--|--|--|--|--------------|
| was filed on | | erial No | | | | | |
| and was amended | on | (if applicable). | | • | | | |
| I hereby state the claims, as amen information which is Regulations, Section | ded by any amer material to the e | dment referred | to above or | of record. | acknowled | | ose |
| I hereby clain patent or inventor's ce certificate having a fili | ertificate listed belo | w and have also | identified belo | ow any foreig | n applicatio | foreign application(s) on for patent or invent | |
| Number | Count | ry Date f | Filed | Yes | No | o | |
| I hereby clair below and, insofar as States application in t the duty to disclose n between the filing date | the subject matt he manner provid naterial information | er of each of the ed by the first pa n as defined in T | e claims of thi aragraph of Tr itle 37, Code | is application tle 35, United of Federal R | is not discl d States Coolegulations, | de, §112, I acknowle §1.56(a) which occur | ited dge |
| Appl. Serial No. | Filing Date | | Status-pate | ented, pendin | g, abandone | ed | |
| I hereby apportant Trademark Office | | | secute this app | plication and | to transact a | all business in the Pa | tent |
| | | Lawrence S. C | Cohen Reg. N | lo. 25,225 | | | |
| Address all telephone Address all correspor | | Lawrence S. Cohen (310) 231-6898 Lawrence S. Cohen, Attorney 10960 Wilshire Boulevard, Suite #830 Los Angeles, California 90024 | | | | | |
| willful false statement | f are believed to I is and the like so r | oe true; and furth nade are punisha | ner that these able by fine or | statements imprisonmer | were made nt, or both, u | all statements made with the knowledge inder §1001 of Title 1 application or any pa | that 8 of |
| Full name of sole or f | ^ | | | | | | |
| Inventor's Signature Residence Address Post Office Address | 8540 Mulholland | | | | .99 | | |
| Full name of second | or co-inventor | | | Citizen | ship | | |
| Inventor's Signature | | | Da | ate | | | |
| Residence Address Post Office Address | | | | | | | |